



Congressional Art Competition Entry Form

	Artist Information		
Full Namo:			
Full Name: First		Last	
Date of Birth:	Grade:	Gender:	
Address:			
Address:	Street Address		
City	State	ZIP Code	
Phone:	Email:		
Parent/Guardian Name (if under 18)	:		
Phone (if under 18):	<i>First</i> Email (if under	Last 18):	
Education			
Name of High School:			
Teacher Name:			
eacher Phone: Teacher Email:			
	Art		
-	larger than 26x26x4 and must be two- t our office in identifying the piece (cold	dimensional. Please provide details in the ors, objects in the piece, etc.).	
Title of Entry:			
Description:			
	Assessment and Cissus store		
undersigned student and that it is no right to publicly display the art entry	of copied from, nor does it include, any and grant the right to reproduce the ar nber and their employees from any liat	bove is an original work of authorship by the other person's copyrighted work. I grant the t entry for any non-commercial purpose. The bility for damage, loss, or misappropriation of	
Student Signature:		Date:	
Parent/Guardian Signature (if under	18):	Date:	